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2. Specification		36	6. Nucleotic	le and/or A	mino Acid Sequen	ce Submission		
(preferred arrangement set forth below)		-		able, all ne	•			
- Descriptive title of the Invention			а.] Com	outer Readable Cop	ру		- 1
- Cross References to Related Applications - Statement Regarding Fed sponsored R&D			b.	l Pape	r Copy (identical to	computer copy)		- 1
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- Reference to Microliche Appendix - Background of the Invention - Brief Summary of the Invention			с.] State	ment verifying iden	tity of above copi	es	
- Brief Summary of the Invention - Brief Description of the Drawings (if filed)			ACCOMBAN	VING ADI	LICATION PARTS	<u> </u>		-
			7. X		ent Papers (cover s		(s))	
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3. #Drawing(s) (35 U.S.C. § 113)	Total Sheets	16	9.	English T	ranslation Docume	nt (if applicable)		
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i. DELETION OF INVENTOR(S)	. ,		14.	Certified		Other:		
Signed statement attached deleting in application, see 37 C.F.R. §§ 1.63(d)(or		-	ocument(s)			l
application, see 37 C.F.R. 33 1.03(u)/.	z) and 1.55(b).			(if foreigr claimed)	priority is			
16. If a CONTINUING APPLICATION, check approprie	ate box, and supply the	requisite	information below		reliminarv amendm	ent:		-
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Prior application information: Examiner:	Group / Art Unit:							1
For CONTINUATION or DIVISIONAL APPS only: The is considered as being part of the disclosure of the a						lied under Box 4b	,	
reference. The incorporation can only be relied upon						ts.		
	17. CORRESP	ONDEN	CE ADDRESS					
Customer Number or Bar Code Label	22928			or _] Correspondence	address below		
				·····				
NAME Timothy Krogh	TI 0.4							
ADDRESS Corning Incorporated, SP		NIV		I -	ID CODE	14831		
CITY Corning COUNTRY USA	STATE TELEPHONE	NY 2743			IP CODE AX	(607) 974-38 ⁴	18	
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Date

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Signature

FEE TRANSMITTAL for FY 2001

	Comp	lete if Known	
	Application Number	To Be Assigned	
	Filing Date	Herewith	
	First Named Inventor	Chien, Ching-Kee	
	Examiner Name	To Be Assigned	
	Group / Art Unit	To Be Assigned	
_	Attorney Docket Number	SD01_0/8	

TOTAL AMOUNT OF PAYMENT (\$)/94.0) ^(1	orney L	ocket mui	inei 2501-0	148		
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)					
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	Lar	ge Entitl				Foo Daid	
Deposit Account Number 03-3325	Fee Cod			e Description		Fee Paid	
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Deposit Account Name Corning Incorporated	127	50	Sur	charge - late provisional cover sheet	filing fee or		
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Under 37 C.F.R. §§ 1.16 and 1.17	147	2,520	For	filing a request for reexa	amination		
2. Payment Enclosed: Check Money Order Other	112	920*	Red	questing publication of S Examiner action	IR prior to		
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106 330 Design filing fee	128	1,890	Ext	ension for reply within fif	th month		
10 Plant filing fee	119	310	Not	ice of Appeal			
108 740 Reissue filing fee	120	310	Filir	ng a brief in support of a	n appeal		
114 160 Provisional filing fee	121	270	Red	quest for oral hearing			
# SUBTOTAL (1) (\$)740.00	138	1,510	Pet	ition to institute a public	use proceeding		
2. EXTRA CLAIM FEES	_ 140	110	Pet	ition to revive - unavoida	able		
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SUBTOTAL (2) (\$)54.00	į		Basic Filing		SUBTOTAL (3)	(\$)	
SUBMITTED BY			C	ompleted (if appli	icable)		
Name (Print/Type) Timothy Krogh		Regist	ration No	o. (Attorney/Agen	t) 40688		
Signature T/			Date	1/24/02			